

ACCOUNT CLERK ENTRY/JOURNEY

Supplemental Questionnaire

NAME: _____
(Last) (First) (Middle Initial) Social Security Number

Account Clerks perform difficult and responsible clerical work involving financial recordkeeping and statistical records; review and reconcile financial and budget reports with source documents, invoices, purchase orders, and other materials; process financial and statistical documents, such as purchase orders, payroll time reports, and statistical reports; and receive and reconcile revenues and disbursements.

Submit this completed supplemental questionnaire along with your application form and clerical assignment preference form. Resumes, letters, and other materials will not be considered as responses to the items in the supplement. APPLICATIONS RECEIVED WITHOUT A SUPPLEMENTAL QUESTIONNAIRE AND CLERICAL ASSIGNMENT PREFERENCE FORM WILL NOT BE CONSIDERED.

1. I would like to be considered for Account Clerk - Entry. Yes ☐ No ☐

NOTE: If you are only interested in being considered for Account Clerk – Entry, you do not need to complete question number 2.

2. I would like to be considered for Account Clerk - Journey. Yes ☐ No ☐

- a) Do you have experience processing financial and statistical documents? Yes ☐ No ☐
(Examples include purchase orders, payroll time reports, and statistical reports.)

If yes, complete the section(s) below.

Job Title: _____ Employer: _____ Dates: _____ to _____	Job Title: _____ Employer: _____ Dates: _____ to _____
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- b) Do you have experience reviewing and reconciling financial and budget reports? Yes ☐ No ☐
(Examples include invoices, revenues/disbursements, and purchase orders.)

If yes, complete the section(s) below.

Job Title: _____ Employer: _____ Dates: _____ to _____	Job Title: _____ Employer: _____ Dates: _____ to _____
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- c) Do you have experience performing clerical accounting and/or bookkeeping work? Yes ☐ No ☐
(Examples include general ledgers, accounts payable/receivable, fiscal controls, and similar financial records.)

If yes, complete the section(s) below.

Job Title: _____ Employer: _____ Dates: _____ to _____	Job Title: _____ Employer: _____ Dates: _____ to _____
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I certify that all the statements made in this application supplement are true, complete, and correct to the best of my knowledge and are made in good faith. I understand that any misrepresentation and/or falsification of my answers may result in rejection of my application for this recruitment. My signature authorizes Placer County to make any appropriate investigations to verify information.

Signature of Applicant: _____ Date: _____